

# Experts, advocates worry Lindsay Clancy's case may further stigmatize postpartum mood disorders

By [Jessica Bartlett](#) Globe Staff, Updated February 9, 2023, 9:00 p.m.



Melissa Anne DuBois, who has three children, struggled with postpartum OCD. ERIN CLARK/GLOBE STAFF

As the legal proceedings unfold against Lindsay Clancy in the deaths of her three children, mothers and professionals who support new parents have recoiled over how postpartum mood disorders have been portrayed, saying prosecutors and the defense are each missing the complexity and nuance of the mental health challenges.

Experts worry the various characterizations of what Clancy may have experienced could discourage women in the grips of a postpartum mood disorder from seeking care.

“The rhetoric coming from the prosecution and other people in authority hazardously distort the medical complexity of this disorder,” said Melissa Anne DuBois, an OB-GYN nurse and perinatal mental health advocate. “When they paint Lindsay as a monster who carried out an elaborate, premeditated murder, instead of as someone suffering from a serious mental illness that wasn’t properly treated and who subsequently had a psychotic break, it sends a message to all the struggling parents out there [that] nothing can help me.”

Much of the concern from professionals and advocates was aimed at Plymouth District Attorney Timothy Cruz’s office for how it has portrayed Clancy, particularly at her arraignment on murder charges Tuesday. For example, Assistant District Attorney Jennifer Sprague characterized the 32-year-old Duxbury mother as someone who seemed well enough to conduct typical activities with her children on the day of their deaths, while, at the same time, being so cunning that she plotted out the attacks with precision.

While Clancy had sought help for mental illness several times, Sprague said she “appeared to be getting better” in the weeks leading up to the killings, and referenced examples in which Clancy seemed to function normally.

Sprague detailed how on the day of the crime, Clancy took her 5-year-old daughter to the pediatrician without incident, and texted photos to her mother and husband of the kids playing in the snow. Sprague said Clancy’s husband told police that she was having “one of her best days.”

Sprague then said that by looking up how far her husband would have to drive to run errands, Clancy was planning out how much time she would have alone with the children to commit the alleged crimes, acts that were done with “deliberate premeditation and extreme atrocity and cruelty,” Sprague said.

Some experts and advocates say the prosecution's language risks further stigmatizing women who experience postpartum issues. In many ways, Sprague's comments echo those made when Andrea Yates killed her five children in 2001, DuBois said.

"We consider perinatal mental health your problem that you caused, or you weren't strong enough to deal with," DuBois said. She believes it will take a "tremendously powerful cultural shift" to provide postpartum families with the support they need, including in-home visits and immediate access to specialized perinatal mental health care. "We are so far away from where we need to be."

Parts of the prosecution's argument have also created confusion around how mental health disorders present. While some symptoms of postpartum depression and anxiety might be apparent — an inability to sleep or a lack of motivation to complete tasks — not all postpartum disorders are so obvious, said Sarah Baroud, a therapist and member of the Postpartum Support International chapter in Massachusetts. For psychosis in particular, someone can seem OK and simultaneously be in a psychotic state, or oscillate between experiencing breaks from reality and moments of clarity.

"She might have also been experiencing mania or depression or psychosis. These things aren't as obvious as we may think," Baroud said. "I experienced postpartum [challenges] myself, and I could put on a good face. People assume people will talk or look a certain way. That's not the case."

The Plymouth district attorney's office has [said](#) that seeking justice for the Clancy children and the community is also part of its mission.

Much of the conversation around the case has also blurred the distinctions among postpartum depression, anxiety, and psychosis. Baroud said that has created the misperception that postpartum mood disorders are a slippery slope into other illnesses. In reality, each disorder is its own distinct diagnosis. Some, such as bipolar disorder, can increase the risk of psychosis, and a person could have several diagnoses at once.

Moreover, postpartum psychosis is rare and just because someone is diagnosed with postpartum depression does not mean that will lead to postpartum psychosis.

That confusion could lead to more shame and stigma for women, said Jessie Colbert, executive director of Mass PPD Fund, a nonprofit focused on awareness, training, and advocacy on perinatal mood and anxiety disorders.

“The case has confused common mental health challenges with the much more severe postpartum psychosis, which is a psychiatric emergency,” Colbert said. “Our worry is the confusion may create more fear and shame around symptoms that are so common and treatable. That shame is already so much of a challenge addressing this issue, so many more people will go without help.”

Experts and advocates have also been troubled by the prosecution's suggestion that Clancy's mental health challenges were behind her, even though she had admitted herself to McLean Hospital, a psychiatric treatment facility, as recently as the beginning of January. Treatment takes time, they said, and people can be in and out of crisis.

“It's sickening how [the prosecution] is even trying this case,” said DuBois, who experienced postpartum OCD after the birth of her first child.

“I'm honestly at a loss about the strategy of the prosecutors, except to say that I think MANY women will feel that the devastating experience of postpartum mood disorders is profoundly under appreciated by this argument,” Jill Fieleke, a board certified psychiatric nurse practitioner and nurse midwife, who offers care primarily to pregnant and postpartum women, wrote in an e-mail.

Some professionals also worry that defense arguments as well could increase the stigma around postpartum mental health challenges. Clancy's attorney Kevin Reddington has raised the issue of mental impairment and has focused on the medications she was prescribed. In comments to reporters, Reddington asserted that Clancy was overmedicated with 13 prescriptions given over a period of four months.

Baroud said medication can be a life-saver for many, but the rhetoric of the case has contributed to the fear that medication could make people's conditions worse.

Erica Putnam, a former resident of Duxbury who now lives in Medford with her three children, said she appreciates that prosecutors are just trying to do their job, but said that their arguments feed into an idea that women are expected to be happy with their babies and with motherhood.

"If [Clancy] did not have a mental illness, she would not have been admitted to McLean Hospital. She would not have been on so many antidepressants. To say she was of sound mind and planned to do what she did is like saying she was just an evil person and was totally fine. . . . It is just not the case," Putnam said. "To say it was murder dismisses the fact that mental illness is real and doesn't discriminate."

This case is evidence that parents need more support for mental health issues and that the state should pass legal protections for new moms, said Jamie Zahlaway Belsito, founder of the Maternal Mental Health Leadership Alliance. One such bill filed last year included a requirement that perinatal psychiatric complications be considered in criminal sentencing. Similar legislation is likely to be filed this year.

"Clearly something didn't work here," Belsito said. "We need policies that will put people in situations where they are cared for, not demonized and villainized."

There are some signs, however, that perceptions of postpartum mood disorders are starting to change. In childbirth classes DuBois teaches and in her organization's social media sphere, communities of parents have overwhelmingly responded with compassion and empathy to Clancy's case.

"Maybe, just maybe, we've tipped the pendulum in the right direction," she said.

*Laura Crimaldi and John R. Ellement of the Globe staff contributed to this report.*

*Are you or someone you know in trouble? Or feeling alone? You're not alone. You can reach the National Suicide Prevention Lifeline by dialing or texting 988, or [chatting 988 at 988lifeline.org](https://988lifeline.org). A call, chat, or text to that line will connect you with a local crisis center through the 988 Suicide & Crisis Lifeline network. The American Foundation for suicide prevention has additional resources at <https://afsp.org/get-help>.*

*For postpartum care help, view a list of resources [here](#).*

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Jessica Bartlett can be reached at [jessica.bartlett@globe.com](mailto:jessica.bartlett@globe.com). Follow her on Twitter [@ByJessBartlett](https://twitter.com/ByJessBartlett).

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